



COUNTY OF LOS ANGELES – DEPARTMENT OF MENTAL HEALTH
PROGRAM SUPPORT BUREAU
WORKFORCE EDUCATION AND TRAINING (WET) DIVISION

**LICENSURE PREPARATION PROGRAM (LPP)
MARRIAGE AND FAMILY THERAPIST (MFT) STANDARD WRITTEN EXAMINATION**

The WET Division announces a limited number of slots available at a discounted rate for the MHSA WET-funded Licensure Preparation Program (LPP) to qualified public mental health staff (DMH-operated and DMH-contracted programs).

The following study package is available through the Association of Advanced Training in Behavioral Sciences (AATBS):

AATBS MFT WRITTEN COMBO PACKAGE INCLUDES:

- 2 Comprehensive Study Volumes
- Orientation & Strategies Volume
- Exam Readiness Digital Lectures
- TestMASTER: 5 full-length online practice exams with four months access time
- Domain Quizzes: an additional quiz program with over 500 questions
- Expert Phone Consultation: one-on-one assistance available with exam experts
- Live 1-Day Workshop: 7 hours of instruction covering exam content and strategies

Visit www.aatbs.com for more details about the package.

Retail Value: \$525 MHSA WET Participant Price: \$50

MFT Standard Written Workshop Date and Location

Date: Sunday, July 13, 2014

Time: 9:00 am – 5:00 pm

Location: Phillips Graduate Institute, 19900 Plummer St., Chatsworth, CA 91311

APPLICATION DEADLINE: July 8, 2014, OR WHEN SLOTS ARE FILLED. SPACE IS LIMITED.

Attendance to the Live 1-Day Workshop is MANDATORY for all MHSA-WET Participants

ELIGIBILITY:

- Must be in good standing with current employer; no disciplinary action within the last year
- Must have completed the required supervision hours
- **APPROVED BY THE LICENSING BOARD AND RECEIVED THEIR ELIGIBILITY NOTICE TO TAKE THE LICENSURE EXAMINATION**
- Currently providing a minimum of 65% of their time in direct clinical services in public mental health
- Has not previously participated in the MHSA WET-funded LPP for the MFT Standard Written Examination; this package is available one time per individual

PRIORITY WILL BE GIVEN TO CLINICIANS WHO MEET AT LEAST ONE OF THE FOLLOWING CRITERIA:

- If applicable, license-waivered status with employer to expire within 12 months
- Previous attempt(s) at passing the MFT Standard Written Examination

INSTRUCTIONS:

1. Please **scroll down** for the application form, which must be completed and faxed to Angelica Fuentes at (213) 252-8776. ***In addition, please attach the necessary documentation (i.e. eligibility letter or web print out) indicating board approval to take the exam.*** Applications will be accepted until **July 8, 2014**, or when capacity is reached.
2. Once approved, an e-mail confirmation will be sent to participants.
3. Participants will be given a phone number to register and pay the non-refundable fee of \$50 by VISA, MasterCard or American Express to AATBS.
4. AATBS will register participants for the requested workshop and mail the study package to the address provided on the application when payment is received.

All applications are reviewed. Submission of application does not guarantee approval.

CONTACT: Angelica Fuentes, LCSW E-mail: afuentes@dmh.lacounty.gov



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MARRIAGE AND FAMILY THERAPIST (MFT) STANDARD WRITTEN EXAMINATION

Print or Type Only

TITLE: LPP MFT Standard Written Examination		DATE(S): Sunday, July 13, 201	
FIRST NAME:		LAST NAME:	
JOB TITLE:	DISCIPLINE:	ETHNICITY: (optional)	
AGENCY:		PROGRAM:	
MAILING ADDRESS FOR STUDY PACKAGE:			
CITY:		STATE:	ZIP:
PHONE #:	E-MAIL: (required for information)		
LANGUAGE(S) FLUENCY: (other than English)			

Service area of employment: 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐

Have you previously taken the MFT Standard Written Examination? Yes ☐ No ☐

Is your license-waivered agreement with your employer expiring within 12 months? Yes ☐ No ☐

Name of Applicant (Print)

is currently providing a minimum of 65% of his/her time in direct clinical services in public mental health; is in good standing with his/her employer with no disciplinary action within the last 12 months; successfully completed the required supervision hours; and is approved by the board to take the MFT Standard Written Examination.

Agrees to the following terms and conditions:

Name of Applicant (Print)

- Complete the licensure preparation program by attending the mandatory workshop and participating in all offerings of the program.
- Provide the WET Division examination results and any other information relating to employment and promotional status.
- Understand that the mandatory workshop is to be taken on his/her own time.

The WET Division will provide participants with the registration contact information upon approval. Participants must register and pay the non-refundable discounted fee of \$50 by VISA, MasterCard or American Express.

Return Application to:

Angelica Fuentes, LCSW
WET Training Coordinator

Fax: (213) 252-8776

E-mail: afuentes@dmh.lacounty.gov

No cover sheet necessary when faxing.

Signature of Applicant

Date

Signature of Supervisor

Date

Name of Supervisor

Supervisor's Phone #

Supervisor's E-mail Address